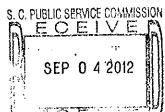
Date: 8/23/2012

238922

polic Service Commission of South Carolina 101 Executive Center Dr., Suite 100 Columbia, SC 29210



S. 3.



Phone: 803-896-5100 Fax: 803-896-5199 www.psc.sc.gov

Print

omplainant or Legal Representative Information: * Required Fields	
ame * John Thoma	
rm (if applicable)	
ailing Address * 1157 Molokal Drive	
ty, State Zip * Tega Cay, SC 29708 Phone * 803-548-2617	
mail *	
ame of Utility Involved in Complaint: * Utilities inc.	$\neg$
NOTE: If AT&T is the utility involved, please complete the attachment located at the end of this form.	
ype of Complaint (check appropriate box below.) *	
Billing Error/Adjustments Deposits and Credit Establishment Wrong Rate Refusal to Connect Service Disconnection of Service Payment Anangements Water Quality Line Extension Issue Service Issue Meter Issue Other (be specific) unjustified rate hike	
Nama of	$\exists$
eve you contacted the Office of Regulatory Staff (ORS)? * Yes No ORS Contact:	
oncise Statement of Facts/Complaint: * (This section must be completed. Attach additional information to this page if necessary.)  This water company has had numerous hikes and the service has always been poor. A new hike is just not right.	$\dashv$
dief Requested: " (This section must be completed. Attach additional information to this page if necessary.)	
ep the rate the same.	
ATE OF SOUTH CAROLINA ) VERIFICATION	
) Yearnest Tree Online	
CNITOR	摩
John Thoma verify that I have read my complaint filed on 08/23/2012  Complainant's Name *	<b>然</b>
know the contents thereof, and that said contents are true.    Know the contents thereof, and that said contents are true.	發

Page Anf 2